

MATERNAL SMOKING

(371)

PARTICIPANT TYPE.....PREGNANT, BREASTFEEDING, NOT BREASTFEEDING WOMEN
HIGH RISK.....No

RISK DESCRIPTION:

Any smoking of tobacco products, i.e., cigarettes, pipes, cigars (does not include chewing tobacco)

ASK ABOUT:

- Her understanding of the potential dangers to herself and her fetus or infant
- Her attitude about and interest in smoking cessation strategies and programs
- Previous experiences trying to cut back or quit
- Barriers to accessing smoking cessation support including finances, transportation, family support
- Oral health practices
- Alcohol and other drug use (women who smoke are more likely to also use other substances)
- Intake of vitamin-C rich foods

NUTRITION COUNSELING/EDUCATION TOPICS:

- All Women:
 - Smoking increases oxidative stress and metabolic turnover of vitamin C. This increases the requirement for vitamin C. Reinforce vitamin C-rich choices in the WIC food package and in the rest of her diet.
- Pregnant Women:
 - Maternal smoking can cause serious complications including premature separation of the placenta (a life-threatening condition for the fetus), preterm delivery and fetal growth retardation. The fewer cigarettes she smokes, the less chance there will be of smoking related problems for herself and her baby.
 - Stopping or cutting back significantly before the third trimester increases the chances of her baby being born at a normal weight.
 - Evidence suggests babies born to mothers who smoked during pregnancy are more likely to smoke when they grow up.
 - Reinforce the importance of adequate weight gain for a healthy birthweight.

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NUTRITION COUNSELING/EDUCATION TOPICS (CON'T):

- Breastfeeding and Not Breastfeeding Women:
 - Maternal smoking has been linked to fussiness, colic, lower milk production, interference with milk let-down, and early weaning. The less she smokes, the less likely it is that these problems will arise.
 - Smoking can also affect her nutrient status and interfere with dietary intake.
 - Secondhand smoke exposure increases her baby's chances of frequent respiratory and other illnesses.
 - She can help keep her baby and herself healthy by quitting smoking or at least cutting back on the number of cigarettes she smokes per day.
 - Smoke after breastfeeding rather than before to reduce the amount of nicotine in her milk during nursing.
 - Smoke outside and away from the baby.
 - Do not smoke while holding her baby.

POSSIBLE REFERRALS:

- Refer to the ND Quits Program (online: <https://ndquits.health.nd.gov> or by phone: 1-800-QUIT-NOW or 1-800-784-8669 (1-800-842-4681 for the hearing impaired)).
- Refer to community smoking cessation programs.